



DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0701]

Proposed Information Collection (VA Form 10-21081 Bereaved Family Member Satisfactory Survey)

Activity: Comment Request.

AGENCY: Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: The Veterans Health Administration (VHA), Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each extension collection, and allow 60 days for public comment in response to the notice. This notice solicits comments on the information needed for Veterans, Veteran Representatives and health care providers to request reimbursement from the federal government for emergency services at a private institution.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before [INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

ADDRESSES: Submit written comments on the collection of information through Federal Docket Management System (FDMS) at www.Regulations.gov; or Audrey Revere, Office of Regulatory and Administrative Affairs, Veterans Health Administration (10B4), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420 or e-mail: Audrey.revere@va.gov. Please refer to "OMB Control No. 2900-0701" in any correspondence. During the comment period, comments may be viewed online through the FDMS.

FOR FURTHER INFORMATION CONTACT: Audrey Revere at (202) 461-5694.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995 (Public Law 104-13; 44 U.S.C. 3501 – 3521), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VHA invites comments on:

- (1) whether the proposed collection of information is necessary for the proper performance of VHA's functions, including whether the information will have practical utility;
- (2) the accuracy of VHA's estimate of the burden of the proposed collection of information;
- (3) ways to enhance the quality, utility, and clarity of the information to be collected;
- and (4) ways to minimize the burden of the collection of information on

respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Titles: Bereaved Family Member Satisfaction Survey.

OMB Control Number: 2900-0701.

Type of Review: Revision.

Abstract: The death rate for Veterans will continue to grow as the number of Veterans 85 years of age and older is projected to increase by 32 percent between 2009 and 2018. Given this trend, the VA will face substantial challenges in providing care to Veterans near the end of life. For example, extensive data from non-VA health care systems demonstrates that physical symptoms like pain, dyspnea and nausea are common in advanced illness, but are under-recognized and inadequately managed.. Other studies have found that providers often lack the time and communication skills to discuss goals of care and treatment preferences with patients and families; there is strong evidence that when providers fail to discuss goals of care with patients and families, patients often receive unwanted, aggressive life-sustaining treatment that is not consistent with their preferences. A related problem has been the high incidence of deaths in an acute care setting. As many Veterans approaching end of life may prefer a more quiet and comfortable setting than can be provided in acute care, with improved communications and availability of services much of this end of life care could be shifted to a VA hospice unit or to hospice in the Veteran's home. The VA has been and continues to be a leader among healthcare systems in the provision of hospice and

palliative care. National VA initiatives have been implemented and continue to support the development and expertise of palliative care consult teams.

Affected Public: Individuals or Households.

Estimated Annual Burden: 1,833 burden hours.

Estimated Average Burden Per Respondent: 10 minutes.

Frequency of Response: Annually.

Estimated Number of Respondents: 11,000

DATED: November 20, 2014.

By direction of the Secretary:

Crystal Rennie, Department Clearance Officer,
Department of Veterans Affairs.

Billing Code 8320-01

